

Providers: Understanding the Affordable Care Act

The Affordable Care Act (ACA) has greatly expanded health insurance options for many individuals. As a result, many patients who had not previously participated in the insurance market now have access to new coverage options. Below is an overview of the insurance changes under the ACA and tips to help newly insured patients navigate the process of choosing and using a health insurance plan.

What are key reforms under the ACA?

The ACA includes many important reforms relevant to patients:

- **Expanded access to health insurance coverage**
 - Expanded Medicaid: Adults ages 19-64 without dependents whose income is less than 138% of the federal poverty level now qualify for Medicaid
 - Marketplace tax credits: Individuals whose income is less than 400% of the federal poverty level may receive premium tax credits to purchase private insurance on the Health Insurance Marketplace and cost-sharing reductions to make using the coverage more affordable
- **Insurance reforms**
 - Consumers cannot be denied coverage based on pre-existing conditions
 - Insurance companies cannot drop coverage if patients get sick
 - Insurance companies cannot place annual or lifetime dollar limits on essential health benefits

When can individuals enroll in a health insurance plan?

The next Open Enrollment Period will run from November 1, 2015-January 31, 2016. During open enrollment, individuals can purchase coverage through the Marketplace or directly from insurance companies. Outside of open enrollment, consumers must experience a qualifying life event, such as getting married or having a baby, in order to purchase coverage inside or outside the Marketplace. This is called a Special Enrollment Period.

Individuals who qualify for Medicaid may apply at any point during the year because Medicaid does not have an Open Enrollment Period.

How can patients enroll in health insurance?

Individuals and families wanting to enroll in health insurance, either through Medicaid or a Marketplace plan, should first go to [GetCoveredIllinois.gov](https://www.getcoveredillinois.gov) and answer a few questions to find the right place to start an application. The screening tool will direct the patient to an online application for Medicaid or the Marketplace.

Many private insurance plans offered on the Marketplace are also offered outside of the Marketplace. However, financial help to lower the cost of coverage is only available for plans purchased through the Marketplace. Financial help is based on a sliding income scale.

Who can help individuals apply for a health insurance plan?

Navigators and insurance agents or brokers can help consumers, at no cost, compare and enroll in a plan through the Marketplace or apply for Medicaid.

Many clinics, hospitals and community agencies across Illinois have trained and certified Navigators who can guide patients through the health insurance enrollment process for free.

Individuals may visit [GetCoveredIllinois.gov](https://www.getcoveredillinois.gov) or call the Get Covered Illinois Help Desk at **(866) 311-1119** to find Navigators, insurance agents or brokers in their area.

What services are now covered by health insurance plans?

All ACA-compliant insurance plans cover 10 essential health benefit categories. The essential health benefit categories include:

- Ambulatory patient services
- Emergency services
- Hospitalization
- Pregnancy, maternity and newborn care
- Mental health and substance use disorder services
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services
- Pediatric services.

Do challenges exist for newly enrolled patients?

Many newly insured or newly enrolled patients are unfamiliar with the health care services available, including recommended preventive care. Some are still learning the details of health insurance benefits, such as networks, formularies, cost-sharing and other plan benefit designs. Providers play an important role in helping patients work through this confusion and understand how to use their

coverage. Through this process, patients learn how to limit their out of pocket costs, and providers bill and collect payment more easily. Get Covered Illinois is focused on providing patients and providers with new tools and resources to help Illinois residents get covered, stay covered and stay healthy.

How can providers assist uninsured and newly insured patients?

As trusted sources of information, providers can have a significant impact on uninsured and newly insured patient's health care decisions. This includes helping individuals learn more about the quality, affordable coverage options on the Marketplace and how to access financial help to lower the costs of coverage, as well as when and where enrollment opportunities are available.